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Case 15-38133 Doc 1 Filed 11/09/15 Entered 11/09/15 15:30:45 Desc Main B1 (Official Form 1) (04/13) Document Page 1 of 24

United States Bankruptcy Court Northern District of Illinois				Voluntary Petition						
Name of Debtor (if individual, enter Last, First, Middle): Rosario, Yanely Name of Joint Debtor (Spouse) (Last, First, Middle): Segui, Felix Jr.				Middle):						
All Other Names used by the Debtor in the last 8 ye (include married, maiden, and trade names):	ears		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):				years			
Last four digits of Soc. Sec. or Individual-Taxpayer (if more than one, state all): 6320	I.D. (ITIN) /C	Complete EIN		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all):						
Street Address of Debtor (No. & Street, City, State 155 Heathgate Montgomery, IL	& Zip Code):		Street Add	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):						
montgomery, in	ZIPCODE	60538						ZIPCODE		
County of Residence or of the Principal Place of Bu Kendall	isiness:		County of	Residence	e or of the	he Principal Plac	ce of Busin	ness:		
Mailing Address of Debtor (if different from street	address)		Mailing Ac	ldress of	Joint De	ebtor (if differen	t from stre	eet address):		
	ZIPCODE						[:	ZIPCODE		
Location of Principal Assets of Business Debtor (if	different from	street address	s above):				,			
								ZIPCODE		
Type of Debtor (Form of Organization) (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtor Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: Filing Fee (Check one box) ✓ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable only). Must attach signed application for the courconsideration certifying that the debtor is unable except in installments. Rule 1006(b). See Officia	Single U.S.C Railro Stockl Comn Cleari Other Debto Title 2 Intern to individuals rt's to pay fee	(Check in Care Busine e Asset Real E 2. § 101(51B) and broker nodity Broker nodity Broker (Check box, or is a tax-exer 26 of the Unite al Revenue Co	mpt Entity if applicable.) inpt organization and States Code (tode). me box: or is a small busing is not a small busing is not a small busing it	the Petition is Filed (Check one both the as defined in 11 Chapter 7				(Check one box.) pter 15 Petition for ognition of a Foreign n Proceeding pter 15 Petition for ognition of a Foreign main Proceeding Debts box.) r Debts are primarily business debts.		
☐ Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. Check all applicable boxes: ☐ A plan is being filed with this petition ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).										
Statistical/Administrative Information Debtor estimates that funds will be available for Debtor estimates that, after any exempt property distribution to unsecured creditors.				d, there v	will be n	o funds availabl	e for	THIS SPACE IS FOR COURT USE ONLY		
· ·	000- 5	,001- 0,000	10,001- 25,000	25,001- 50,000		50,001- 100,000	Over 100,000			
			\$50,000,001 to \$100 million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More than	1		
Estimated Liabilities	,000,001 to \$	 '	\$50,000,001 to \$100,000,001 \$500,000,001 More than					n		

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Case 15-38133 Filed 11/09/15 Entered 11/09/15 15:30:45 Desc Main B1 (Official Form 1) (04/13 Page 2 Document Page 2 of 24 Name of Debtor(s): **Voluntary Petition** Rosario, Yanely (This page must be completed and filed in every case) All Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: None Location Date Filed: Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: None District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms (To be completed if debtor is an individual 10K and 10Q) with the Securities and Exchange Commission pursuant to whose debts are primarily consumer debts.) Section 13 or 15(d) of the Securities Exchange Act of 1934 and is I, the attorney for the petitioner named in the foregoing petition, declare requesting relief under chapter 11.) that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have Exhibit A is attached and made a part of this petition. explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b). X /s/ C David Ward 11/09/15 Signature of Attorney for Debtor(s) Date Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health Yes, and Exhibit C is attached and made a part of this petition. **▼** No Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached a made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box.) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Doc 1

B1 (Official Form 1) (04/13)	Page 3 of 24 Page 3				
Voluntary Petition	Name of Debtor(s):				
(This page must be completed and filed in every case)	Rosario, Yanely				
Signa	tures				
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative				
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X /s/ Yanely Rosario Signature of Debtor Yanely Rosario Signature of Joint Debtor	petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the				
Telephone Number (If not represented by attorney)	_ 				
November 9, 2015 Date					
Signature of Attorney*	Signature of Non-Attorney Petition Preparer				
X /s/ C David Ward Signature of Attorney for Debtor(s) C David Ward 2938065 C. David Ward 1480 N. Orchard Rd. Ste. 110 Aurora, IL 60506 (630) 585-3164 Fax: (630) 551-7131 cdward1945@yahoo.com	I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.				
	Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)				
November 9, 2015 Date					
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Address				
Signature of Debtor (Corporation/Partnership)					
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Signature Date				
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.				
X Signature of Authorized Individual	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:				
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.				
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.				
Date					

B6 Summary (Criscal Form 6-Summary) (12/14)1

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Inited States Bankruptcy	Court
Northern District of Illir	ois

IN RE:		Case No.
Rosario, Yanely		Chapter 7
	Debtor(s)	•

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 3,800.06		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$ 33,224.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 4,076.25
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$ 4,038.46
	TOTAL	18	\$ 3,800.06	\$ 33,224.00	

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Page 5 of 24 Document **United States Bankruptcy Court Northern District of Illinois**

IN RE:		Case No.
Rosario, Yanely		Chapter 7
	Debtor(s)	•

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 4,940.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 4,940.00

State the following:

Average Income (from Schedule I, Line 12)	\$ 4,076.25
Average Expenses (from Schedule J, Line 22)	\$ 4,038.46
Current Monthly Income (from Form 22A-1 Line 11; OR , Form 22B Line 14; OR , Form 22C-1	
Line 14)	\$ 4,837.32

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 33,224.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 33,224.00

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(If known)

IN RE Rosario, Yanely

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Debtor(s)

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Case No. _

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				

TOTAL

(Report also on Summary of Schedules)

0.00

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IN RE Rosario, Yanely

Debtor(s)

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SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

			,		
	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.		Cash on hand.		50.00
	Checking, savings or other financial accounts, certificates of deposit or		Citibank checking account. Joint account with husband, Felix. FMV \$2800.00		1,400.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Citibank savings account. Joint account with husband, Felix. FMV \$.11		0.06
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		Household goods and furnishings.		350.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Wearing apparel.		500.00
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			

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Debtor(s)

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SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2003 Mercury Sable.		1,500.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
	Animals.	X			
	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			

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SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
35. Other personal property of any kind not already listed. Itemize.	X			
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Debtor(s)

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SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$155,675. *

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE B - PERSONAL PROPERTY			
Cash on hand.	735 ILCS 5/12-1001(b)	50.00	50.00
Citibank checking account. Joint account with husband, Felix. FMV \$2800.00	735 ILCS 5/12-1001(b)	1,400.00	1,400.00
Citibank savings account. Joint account with husband, Felix. FMV \$.11	735 ILCS 5/12-1001(b)	0.06	0.06
Household goods and furnishings.	735 ILCS 5/12-1001(b)	350.00	350.00
Wearing apparel.	20 ILCS 1805/10	500.00	500.00
2003 Mercury Sable.	735 ILCS 5/12-1001(c)	1,500.00	1,500.00

^{*} Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Case No. _____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
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							Summary of Schedules.)	also on Statistical Summary of Certain Liabilities and Related

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Case No.

Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Cartain Liabilities and Palated Data

Statistical Stillmary of Certain Elabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.
ocntinuation sheets attached

B6F (Official Form SF) (15-38133 IN RE Rosario, Yanely SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6403	T		Open account opened 2012-09-07	Х	Χ	П	
Accounts Receivable Ma (original Credito 875 N Michigan Ave # 312 Chicago, IL 60611							597.00
ACCOUNT NO. 3646	Т		Open account opened 2012-09-06		Х	П	
Armor Systems Co (original Creditor:surg 1700 Kiefer Dr Ste 1 Zion, IL 60099							339.00
ACCOUNT NO. 1853	H		Revolving account opened 2007-05-23		Х	Н	339.00
Comenity Bank/Inbryant 1590 E Broad St Columbus, OH 43213							538.00
ACCOUNT NO.	T		Assignee or other notification for:			П	000.00
Portfolio Recovery Associates, LLC I20 Corporate Blvd. Norfolk, VA 23502			Comenity Bank/Inbryant				
3 continuation sheets attached			(Total of th	Sub is p			\$ 1,474.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St	als atis	tica	n al	•

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IN RE Rosario, Yanely

Debtor(s)

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(•	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3224			Installment account opened 2012-10-22	Ħ	X	H	
Dept Of Education/neln 121 S 13th St Lincoln, NE 68508							3,161.00
ACCOUNT NO. 3124			Installment account opened 2012-10-22		Χ		•
Dept Of Education/neln 121 S 13th St Lincoln, NE 68508			•				
ACCOUNT NO.	-		medical services		Х		1,779.00
Dupage Medical Group 15921 Collections Center Drive Chicago, IL 60693					^		100.00
ACCOUNT NO. 9479			Open account opened 2012-10-25		Х		100.00
Healthcare Recovery So (original Credito 1515 W 190th Street S-35 Gardena, CA 90248							
ACCOUNT NO. 1518	-		Open account opened 2012-09-27		Х		858.00
Healthcare Recovery So (original Credito 1515 W 190th Street S-35 Gardena, CA 90248							
ACCOUNTAGE 1422			Open account opened 2012-01-26		Х		214.00
ACCOUNT NO. 1122 Healthcare Recovery So (original Credito 1515 W 190th Street S-35 Gardena, CA 90248			Open account opened 2012-01-20		^		
0.000			1 10040 00 40				86.00
ACCOUNT NO. 2103	$\frac{1}{2}$		Open account opened 2013-09-18		X		
L J Ross Associates In (original Credito Po Box 1838 Ann Arbor, MI 48106							
				Ш		Ц	196.00
Sheet no1 of3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th		age	e)	\$ 6,394.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als tatis	tica	n al	\$

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(Continuation Sheet)					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIOUIDATED	DIEDITED	DISCOLED	AMOUNT OF CLAIM
ACCOUNT NO. 5403			Open account opened 2008-09		Х			
Med Busi Bur (original Creditor:medical) 1460 Renaissance D Suite 400 Park Ridge, IL 60068								451.00
ACCOUNT NO. 5435	t		Open account opened 2012-10		Х			
Med Busi Bur (original Creditor:medical) 1460 Renaissance D Suite 400 Park Ridge, IL 60068								50.00
ACCOUNT NO. 4082	+		Open account opened 2012-11-08		Х	,		56.00
Merchants Credit Guide (original Credito 223 W Jackson Blvd Ste 4 Chicago, IL 60606			Open account opened 2012-11-00					55.00
ACCOUNT NO. 1795	+		Open account opened 2012-09-27		Х			55.00
Merchants Credit Guide (original Credito 223 W Jackson Blvd Ste 4 Chicago, IL 60606								400.00
ACCOUNT NO. 2488			Open account opened 2011-08-29		Х	7		460.00
Merchants Credit Guide (original Credito 223 W Jackson Blvd Ste 4 Chicago, IL 60606								100.00
ACCOUNT NO. 4130			Open account opened 2010-04-19		Х	+		100.00
Merchants Credit Guide (original Credito 223 W Jackson Blvd Ste 4 Chicago, IL 60606								
						_	_	100.00
ACCOUNT NO. 4081	-		Open account opened 2012-11-08		Х			
Merchants Credit Guide (original Credito 223 W Jackson Blvd Ste 4 Chicago, IL 60606								
								88.00
Sheet no2 of3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o		oag	ge)	\$	1,310.00
			(Use only on last page of the completed Schedule F. Re the Summary of Schedules, and if applicable, on th Summary of Certain Liabilities and Re	port als e Stati	stic	on cal	\$	

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		((Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4080			Open account opened 2012-11-08		Х		
Merchants Credit Guide (original Credito 223 W Jackson Blvd Ste 4 Chicago, IL 60606							604.00
ACCOUNT NO. 0222	t		Open account opened 2011-09-08		X		33 1133
Merchants Credit Guide (original Credito 223 W Jackson Blvd Ste 4 Chicago, IL 60606					,		
ACCOUNT NO. 1980			Open account opened 2011-12-29 Case number		Х		18,421.00
Midland Funding (original Creditor:ge Mo 8875 Aero Dr Ste 200 San Diego, CA 92123			12 SC 4304		~		3,964.00
ACCOUNT NO.			Assignee or other notification for:				0,304.00
Blatt, Hasenmiller, Leibsker & Moore Llc P.O. Box 5463 Chicago, IL 60680			Midland Funding (original Creditor:ge Mo				
ACCOUNT NO. 3584			Open account opened 2013-05		Х		
Miramedrg (original Creditor:medical) 991 Oak Creek Dr Lombard, IL 60148							
			0		·		309.00
ACCOUNT NO. 2274 Miramedrg (original Creditor:medical) 991 Oak Creek Dr Lombard, IL 60148			Open account opened 2013-06		X		
	L						220.00
ACCOUNT NO. 7609	1		Open account opened 2013-04-17		X		
Tek-collect Inc (original Creditor:assoc 871 Park St Columbus, OH 43215							
							528.00
Sheet no. 3 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of tl	Sub nis p		- 1	\$ 24,046.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als tatis	tica	n ıl	\$ 33,224.00

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

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Fill in this in	nformation to ide	entify your case:		
Debtor 1	Yanely Rosari	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	,	Middle Name	Last Name	
United States Case number		r the: Northern District of Illino	is	Check if this is:
(If known)				An amended filing
				A supplement showing post-petition chapter 13 income as of the following date
Official I	Form 6l			MM / DD / YYYY

Official Form 61

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe Employment

1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	✓ Employed☐ Not employed	Employed Not employed
	Include part-time, seasonal, or self-employed work.		Inside Sales	IT Support Tachnician
	Occupation may Include student or homemaker, if it applies.	Occupation	Inside Sales	IT Support Technician
		Employer's name	M & M Rental Center	Specialty Promotions
		Employer's address	493 Mission St. Number Street	6019 Howard St. Number Street
			Carol Stream, IL 60188-0000 City State ZIP Code	Niles, IL 60714-0000 City State ZIP Code
		How long employed there	? 6 months	9 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

For Debtor 1

For Debtor 2 or

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			TO DODGET !	nor	r-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$1,833.04_	\$	3,004.28
3.	Estimate and list monthly overtime pay.	3.	+\$0.00	+ \$	0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$ <u>1,833.04</u>	\$.	3,004.28

Official Form 6I Schedule I: Your Income page 1 © 1993-2013 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

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Yanely Rosario
First Name Middle Name Case number (if known) LastName

		For	Debtor 1		ebtor 2 or ling spouse	
Copy line 4 here	→ 4.	\$	1,833.04	\$_	3,004.28	
ist all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a.	\$	274.86	\$	456.13	
5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
5e. Insurance	5e.	\$	0.00	\$	30.08	
5f. Domestic support obligations	5f.	\$	0.00	\$	0.00	
5g. Union dues	5g.	\$	0.00	\$	0.00	
5h. Other deductions. Specify:	5h.	+\$_	0.00	+ \$_	0.00	
Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$	274.86	\$	486.21	
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,558.18	\$	2,518.07	
ist all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
8b. Interest and dividends	8b.	\$	0.00	\$	0.00	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent					
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
8d. Unemployment compensation	8d.	\$	0.00	\$	0.00	
8e. Social Security	8e.	\$	0.00	\$	0.00	
8f. Other government assistance that you regularly receive						
Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		\$	0.00	\$	0.00	
Specify:	8f.					
8g. Pension or retirement income	8g.	\$	0.00	\$	0.00	
8h. Other monthly income. Specify:	8h.	+\$_	0.00	+\$_	0.00	
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00	\$	0.00	_
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	1,558.18	+	2,518.07	= \$4,076.2
State all other regular contributions to the expenses that you list in Sche	dule .	J.	_		_	·
nclude contributions from an unmarried partner, members of your household, other friends or relatives.	your c	depend	ents, your roor	mmates, a	nd	
Do not include any amounts already included in lines 2-10 or amounts that are	not a	vailable	e to pay expen	ses listed	in Schedule J.	
Specify:					11.	+ \$0.00
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of C				•		\$_4,076.25
Do you expect an increase or decrease within the year after you file this	form'	,				monthly incom

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Fill in this information to identify your case:			
Debtor 1 Yanely Rosario First Name Middle Name Last Name	Check if this	is:	
Debtor 2	——— An amen	dad filing	
(Spouse, if filing) First Name Middle Name Last Name		ment showing post-	petition chapter 13
United States Bankruptcy Court for the: Northern District of Illinois		s as of the following	
Case number(ff known)	MM / DD /	YYYY	
Official Form 6J		ite filing for Debtor 2 s a separate housel	
Schedule J: Your Expenses			40/40
Be as complete and accurate as possible. If two married people are filir information. If more space is needed, attach another sheet to this form. (if known). Answer every question.			=
Part 1: Describe Your Household			
 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file a separate Schedule J. 			
2. Do you have dependents?			
Do not list Debtor 1 and	Dependent's relationship to Debtor 1 or Debtor 2	De pendent's age	Does dependent live with you?
Debtor 2. each dependent			□ No
Do not state the dependents' names.			☐ Yes
			□ No
			☐ Yes
			□ No □ Yes
			□ No
			Yes
			□ No
			☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you are	re using this form as a supplem	ent in a Chapter 13 c	ase to report
expenses as of a date after the bankruptcy is filed. If this is a supplement	ental Schedule J, check the box	at the top of the forn	n and fill in the
applicable date.			
Include expenses paid for with non-cash government assistance if you such assistance and have included it on Schedule I: Your Income (Office		Your expe	nses
4. The rental or home ownership expenses for your residence. Include any rent for the ground or lot.	•	\$ 1,04	4.85
If not included in line 4:			
4a. Real estate taxes		4a. \$ 0.	00
4b. Property, homeowner's, or renter's insurance		4b. \$ 0.	00

Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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0.00

0.00

4c.

4d.

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Debtor 1

Yanely Rosario
First Name Middle Name

LastName

Case number (if known)_

		Your	expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	150.00
6b. Water, sewer, garbage collection	6b.	\$	50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d. Other. Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$ \$	550.00
8. Childcare and children's education costs	8.	\$	0.00
9. Clothing, laundry, and dry cleaning	9.	\$	250.00
Personal care products and services	10.	\$	100.00
Medical and dental expenses	11.	\$	120.00
Transportation. Include gas, maintenance, bus or train fare.		*	
Do not include car payments.	12.	\$	450.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
4. Charitable contributions and religious donations	14.	\$	0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	528.61
15c. Vehicle insurance	15c.	\$	125.00
15d. Other insurance. Specify:	15d.	\$	0.00
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
7. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	320.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00
9. Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.	Ψ	<u> </u>
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
20a. Mort gages on other property	20 a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Case number (if known)_ Last Name Middle Name 21. Other. Specify: Husbands Credit Card Debt 21. +\$ 100.00 Your monthly expenses. Add lines 4 through 21. 4,038.46 The result is your monthly expenses. 23. Calculate your monthly net income. 4,076.25 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a 23b. Copy your monthly expenses from line 22 above. 23b 4,038.46 23c. Subtract your monthly expenses from your monthly income. 37.79 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? M No. None Yes.

Yanely Rosario

Debtor 1

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Rosario, Yanely 155 Heathgate Montgomery, IL 60538 Document Page 24 of 24 Med Busi Bur (original Creditor:medical) 1460 Renaissance D Suite 400 Park Ridge, IL 60068

C. David Ward 1480 N. Orchard Rd. Ste. 110 Aurora, IL 60506 Merchants Credit Guide (original Credito 223 W Jackson Blvd Ste 4 Chicago, IL 60606

Accounts Receivable Ma (original Credito 875 N Michigan Ave # 312 Chicago, IL 60611

Midland Funding (original Creditor:ge Mo 8875 Aero Dr Ste 200 San Diego, CA 92123

Armor Systems Co (original Creditor:surg 1700 Kiefer Dr Ste 1 Zion, IL 60099 Miramedrg (original Creditor:medical) 991 Oak Creek Dr Lombard, IL 60148

Blatt, Hasenmiller, Leibsker & Moore Llc P.O. Box 5463 Chicago, IL 60680 Portfolio Recovery Associates, LLC 120 Corporate Blvd. Norfolk, VA 23502

Comenity Bank/Inbryant 4590 E Broad St Columbus, OH 43213 Tek-collect Inc (original Creditor:assoc 871 Park St Columbus, OH 43215

Dept Of Education/neln 121 S 13th St Lincoln, NE 68508

Dupage Medical Group 15921 Collections Center Drive Chicago, IL 60693

Healthcare Recovery So (original Credito 1515 W 190th Street S-35 Gardena, CA 90248

L J Ross Associates In (original Credito Po Box 1838 Ann Arbor, MI 48106